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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$100.00

Complete if Known

Application Number 09/991,129
Filing Date November 14, 2001
First Named Inventor David G. DENTON
Examiner Name Henry M. Johnson
Art Unit 3739
Attorney Docket No. 53860/6:1

Certificate

SEP 15 2005

of Correction

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 19-4455 Deposit Account Name: Steel Rives LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets _____ Extra Sheets _____ Number of each additional 50 or fraction thereof _____ Fee (\$) _____ Fee Paid (\$) _____

- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Certificate of Correction

Fees Paid (\$)

100.00

SUBMITTED BY

Signature *Micah D. Stolowitz* Registration No. 32,758 Telephone (503) 294-9189
Name (Print/Type) Micah D. Stolowitz Date September 8, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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SEP 16 2005



PATENT 6,811,565

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent No. 6,811,565 of *B2*

Denton et al.

Issued: November 2, 2004

Application No. 09/991,129

Filed: November 14, 2001

For: SYSTEM AND METHOD FOR LIGHT ACTIVATION OF
HEALING MECHANISM

Date: September 8, 2005

ATTENTION: DECISION AND CERTIFICATE OF
CORRECTION BRANCH OF THE PATENT
ISSUE DIVISION

REQUEST FOR CERTIFICATE OF CORRECTION

It is noted that errors on the part of the applicants appear in the above-identified patent. The errors are of a typographical nature or character as more fully described below. The errors occurred in good faith. Correction of the errors does not involve such changes in the patent as would constitute new matter or would require reexamination.

A Certificate of Correction is requested.

Attached is one sheet of Form PTO 1050.

The exact page and line number where the errors occur in the application are as follows.

Column 2, Line 11 corresponds to application Page 3, Line 1.

Column 2, Line 22 corresponds to application Page 3, Line 11.

Column 3, Line 14 corresponds to application Page 4, Line 24.

Column 4, Line 12 corresponds to application Page 6, Line 14.

Column 4, Line 57 corresponds to application Page 2, Line 5.

Column 6, Line 17 corresponds to application Page 10, Line 3.

Column 7, Line 65 corresponds to application Page 13, Line 5.

Column 8, Line 17 corresponds to application Page 13, Line 19.

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Column 9, Line 3 corresponds to application Page 14, Line 29.

Column 9, Line 19 corresponds to application Page 15, Line 11.

Column 9, Line 65 corresponds to application Claim 2.

Column 10, Line 38 corresponds to application Claim 39.

Please send the Certificate of Correction to:

Micah D. Stolowitz
Stoel Rives LLP
900 SW Fifth Avenue, Suite 2600
Portland, OR 97204-1268

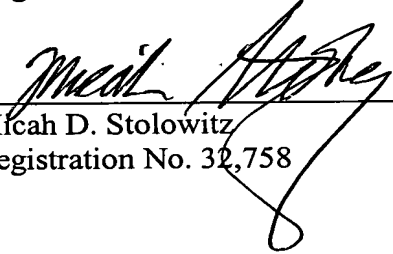
Enclosed is a check for \$100.00 in payment of the fee set forth in 37 CFR 1.20(a).

The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the processing of this request or to credit any overpayment to Deposit Account No. 19-4455. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Healing Machines, Inc., dba Rejuvenitics

By



Micah D. Stolowitz
Registration No. 32,758

STOEL RIVES LLP
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UNITED STATES PATENT AND TRADEMARK OFFICE CERTIFICATE OF CORRECTION

Page 1 of 1PATENT NO. : 6,811,565 *B2*

APPLICATION NO.: 09/991,129

ISSUE DATE : 11/2/2004

INVENTOR(S) : Denton et al.

It is certified that an error appears or errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

In Column 2, Line 11, change "3", to --III--.

In Column 2, Line 22, after "alternative" insert -- embodiment--.

In Column 3, Line 14, after "inflammation" insert --,--.

In Column 4, Line 12, delete "a".

In Column 4, Line 57, change "**120**" to --**122**--.

In Column 6, Line 17, delete "of".

In Column 7, Line 65, change "," to --,--.

In Column 8, Line 17, change "place" to --placed--.

In Column 9, Line 3, before "therapeutic", insert --a --.

In Column 9, Line 19, after "**150**", insert --is --.

In Column 9, Line 65, after "container", insert --;--.

In Column 10, Line 38, after "container", insert --;--.

MAILING ADDRESS OF SENDER (Please do not use customer number below):

This collection of information is required by 37 CFR 1.322, 1.323, and 1.324. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Attention Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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